



Frankfort Fire Protection District
Fire Cadet Application
333 W Nebraska Street
Frankfort, IL. 60423
(815) 469-1700
Fax (815) 469-8377

Prospective Cadet,

Thank you for your interest in the Frankfort Fire Cadet Program. This application is the beginning process to potentially become a member of the fire cadet program. To be considered for the cadet program you must be between the ages of 16 and 19 years old. You will also need to provide all the required documents below. Once you have completed this application in its entirety, secure the application and any other paperwork along with a \$5.00 processing fee in an envelope. You may turn the envelope in at our station #1 which is located at the above address, please address to the attention of Brian Adcock (Cadet Coordinator). If you should have any further questions please do not hesitate to contact me or any member of the fire cadet staff.

Thank You

Brian Adcock (Engineer/Paramedic)
Cadet Coordinator
Frankfort Station #5 (Gold Shift)
Adcock@frankfortfire.org

Josh Seroka (Fire Fighter/Paramedic)
Cadet Coordinator
Frankfort Station #4 (Gold Shift)
Seroka@frankfortfire.org

CHECKLIST:

- | | | |
|------------------------------|---------------------------------|------------------------|
| _____ APPLICATION | _____ RECOMMENDATION LETTER | _____ COPY OF D.L. |
| _____ CURRENT GRADE REPORT | _____ COPY OF PHYSICAL | _____ COPY OF CPR CARD |
| _____ \$5.00 APPLICATION FEE | _____ COPY OF EMT IF APPLICABLE | |

FRANKFORT FIRE CADET APPLICATION

CONTACT INFORMATION FORM

Name: _____

Address: _____ City: _____ State: _____

Phone Number:

Home: () _____ - _____

Cell: () _____ - _____ Cell Phone Carrier (i.e. Sprint) _____

Email Address _____

School: _____ Grade: _____

Date of Birth: _____ Age: _____

SSN: _____ - _____ - _____ Drivers License or ID. # _____

Employer: _____

Years Employed: _____ Immediate supervisor's name: _____

Work Phone Number: () _____ - _____

Parent/Guardian Information

Mother: _____

Father: _____

Other: _____

Emergency Contact Information

Name: _____

Relationship: _____

Phone Number:

Home: () _____ - _____

Cell: () _____ - _____

1. Describe any medical conditions you may have:

2. List any medications that you currently take or have taken in the last 3 years:

3. List any allergies:

4. Have ever been a member of a fire or police cadet program if so where and when:

5. Are you involved in any sports, clubs, or other activities affiliated with school?

Additional Information (use another sheet of paper if needed)

6. What interests you the most about becoming a member of our fire cadet program?

Background Information: a back ground check will be completed. Those convicted of a felony are prohibited from joining.

7. Have you ever been arrested or ticketed (felonies, misdemeanors, traffic violations, etc?)

PARENT /GUARDIAN CONSENT

My son/daughter _____, has my permission to join the Frankfort Fire Cadet program. I, _____, give my consent to allow him/her to be part of the program and do not hold the Frankfort Fire Protection District, its members responsible for any injuries or actions that occur under reasonable circumstances as part of this program.

Applicant signature and date

Parent/guardian signature and date

CONTRACT OF UNDERSTANDING

My son/daughter and I have read this application in full. All information provided here is truthful to the best of our knowledge. The fire cadet program is designed as a learning and training tool for possible future employment in the fire service. This program is a volunteer program and is not a paid position, if accepted as a fire cadet with the Frankfort Fire Protection District, We understand that we are to follow instructions from superiors, and follow department safety protocols at all times. We also understand that he/she will represent the Frankfort Fire Cadet Program in a courteous and professional manner at all times. We also understand that there is a “zero tolerance policy” regarding the use of alcohol and drugs while attending any department function. My son/daughter and I understand that in signing this contract below, we are declaring that any violation of the Frankfort Fire cadet program’s/department’s rules and regulations and standard operating procedures will be dealt with by the fire cadet coordinator and/or department officers and may be grounds for immediate dismissal. Any acts that violate state, federal, or local laws will be referred to the proper law enforcement agency.

Fire Cadet Signature and date

Parent/guardian signature and date